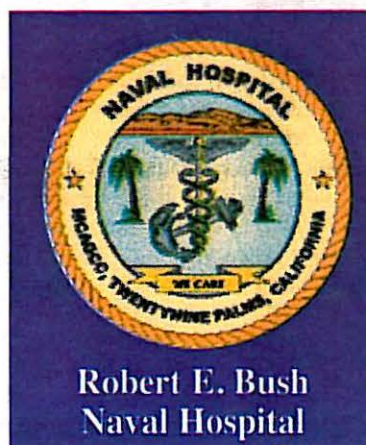




U.S. States MARINE CORPS ANNIVERSARY

Est. November 15, 1775



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Naval Hospital



Inside...

Very often when we close our houses up for the winter, we find that our breathing problems worsen. If so, you or your family member might have asthma.

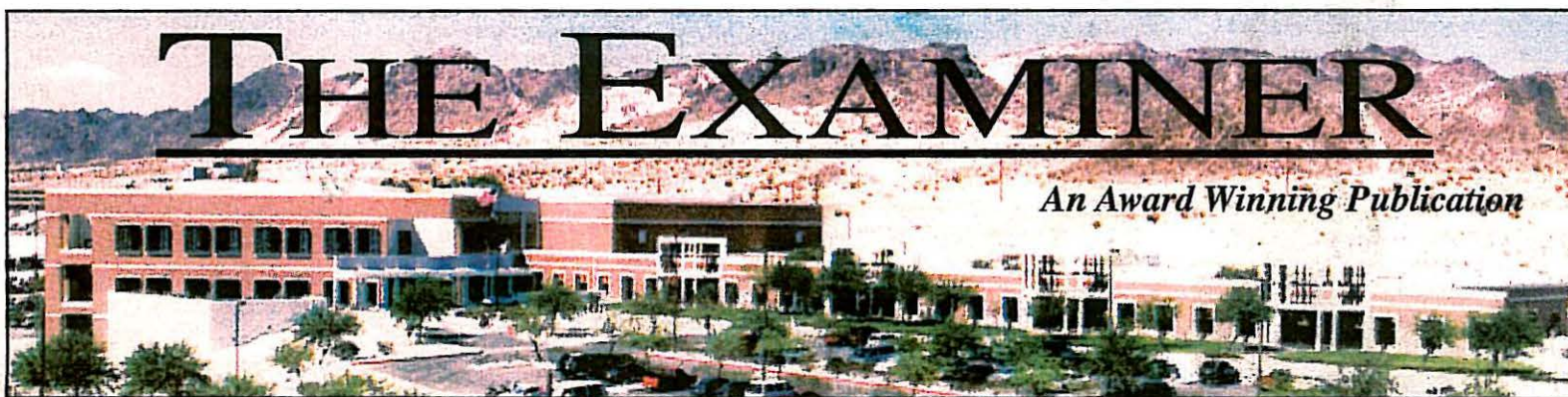
page 2

November is Prematurity Awareness Month and if you are expecting a baby in the next four to five months, knowing the risks of premature births can help to prevent the possibility of delivering your baby too soon.

page 3

Unless a peanut butter and jelly sandwich is your idea of a Thanksgiving meal, you probably have had first-hand experience with the after-dinner fatigue that sets in after the meal. Why do you want to sleep? To flee from the job as dishwasher? Perhaps, but the meal itself plays a big part in the way you feel.

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An Award Winning Publication

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People of the Quarter Honored at Hospital

The Robert E. Bush Naval Hospital recently held its awards ceremony for the selection of the People of the Quarter for the period 1 July to 30 September 2006.



Ensign Elizabeth Angelo, Laboratory Officer, was selected as the Officer of the Quarter. Her citation reads in part, "An

exceptional team builder, you developed new programs designed to meet recent changes in College of American Pathologists (CAP) accreditation requirements resulting in successful re-accreditation inspections in July 2006. You established an outstanding working relationship with all levels of command staff, and were especially effective in mentoring the Laboratory Department's technical staff. You effectively co-lead the efforts of the 2006 Navy Ball Committee, resulting in the selection of a premier ball site, and highly successful fund-raising efforts netting a total of over \$9,000. As an active participant in the command's 'culture of fitness,' you instructed twice weekly cardio-exercise class as part of the Fitness Enhancement Program."

Mrs. Margarita Samaniego, Fiscal Department, was selected as the Senior Civilian of the Quarter. Her citation reads in part, "During this quarter, you provided outstanding customer service to departments in the preparation of fiscal year 2007 departmental budgets. You



identified deviations and trends, making necessary recommendations for the optimization of command resources. You culminated all submissions and formulated a sound fiscal year 2007 annual budget. Always mindful of short tasking turn-arounds, you have proven not to miss a due date from Navy Medicine West. Your initiative has positively impacted the many aspects of the command's

mission. By providing thorough justification and documentation, your efforts directly resulted in the command receiving additional funds. You have also successfully managed the command's prior year accounts, clearing all fiscal year 2000 through fiscal year 2003 accounts, setting the benchmark of prior account success. Due to a budget technician shortage, you also took on multiple responsibilities and provided guidance and education to other staff members. Your hard work and dedication resulted in the command to close out fiscal year 2006 with a 99.9% obligation rate."

Petty Officer 1st Class Byron Jensen, Leading Petty Officer, Preventive Medicine Department, was named as the Senior Sailor of the Quarter. His citation reads in part, "As the Leading Petty Officer, President Ford Contingency Team, you conducted a site visit to the area of operation in the event of President Ford's demise, quickly realizing that the hospital's con-

Continued on page 8

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Are you having problems breathing? Maybe it's Asthma!

By Martha Hunt, MA,
Lt. Cmdr. Chrisanna Johnson, MD, and
Lt. Cmdr. David Wyckoff, MD
Health Promotions and Primary Care Departments
Robert E. Bush Naval Hospital

Very often when we close our houses up for the winter, we find that our breathing problems worsen. If so, you or your family member might have asthma. Each year, nearly 500,000 Americans are hospitalized and more than 5,000 die from asthma. The good news is there are things you can do to make it easier to breath.

What exactly is asthma?

Asthma is a chronic disease of the lungs. It may present as a bad cough, wheezing, a tight feeling in the chest, or trouble breathing. Asthma cannot be cured, but it can almost always be controlled.

What can trigger an asthma attack?

People with asthma have airways that are very sensitive to certain chemicals or other irritating substances. The triggers vary from one person to another. Some common causes of asthma attacks include:

- * Animal dander (from the skin, hair, or feathers of animals)
- * Waste products from dust mites and cockroaches
- * Pollen from trees and grass
- * Mold (indoor and outdoor)
- * Cigarette smoke
- * Air pollution
- * Bacterial and viral infections such as colds and the flu
- * Exercise
- * Strong feelings or stress
- * Changes in weather, cold air
- * Strong odors from painting or cooking
- * Perfumed products
- * Certain medicines and foods.

This is not a complete list of all the things that trigger asthma. People may have trouble with one or more of these trig-

gers. Everyone is different. If you are coughing, wheezing, having trouble breathing, or your chest feels tight, see your health care provider. He or she can help to find out if you have asthma.

If you have asthma, talk to your doctor about a treatment plan. Your plan may include:

- * regular checkups
- * ways to avoid asthma triggers
- * medicines and how to use them properly
- * how and when to use a peak flow meter
- * tests to measure and/or monitor your asthma
- * what to do in an emergency if your asthma gets very bad.

Here are some ways you can help prevent an asthma attack. Remember, everyone is different. Some people have trouble with pollen, others have trouble with tobacco smoke, and others may have trouble with animal dander. Follow the steps that make sense for you.

- * Be aware of what makes you have asthma attacks and try to stay away from those triggers.
- * Get a flu shot, every year as soon as it is available (usually by November). The sooner you get it, the earlier your immune system will be ready to protect you. People with asthma should only get the injection form of the flu vaccine, not the nasal spray Flumist. Watch the base paper and the base e-mail stings for flu shot clinic information or check with the immunization clinic in November.

* Do not smoke. You can't properly control your asthma if you smoke.

* Do not allow others to smoke near you. Second hand smoke is one of the leading causes of childhood asthma

attacks and deaths. In fact, 1 in 10 deaths in babies less than one year of age are directly related to second hand smoke. Secondhand smoke affects people of all ages.

* Do not allow smoking in your home or car.

* Stay indoors with the air conditioner on when the pollen count is high. Ozone and particle pollution can cause asthma attacks. Watch for the Air Quality Index AQI during your local weather report. When AQI reports unhealthy levels, stay inside as much as possible.

* Wash your bedding, clothes, and stuffed toys once a week in hot water.

* Wash your pet and her bedding regularly.

* Wash your hands often.

* Wear a scarf over your mouth and nose in the winter.

* Try to keep your home dust free. This is especially hard in the desert, but this will minimize dust from mites and roaches. Cockroaches are a major trigger for asthma attacks.

* Stay away from chemical sprays in your home. This includes perfumes, air fresheners and chemical insecticides.

* Most importantly, follow your asthma treatment plan.

Work with your doctor or health care provider to develop a written asthma management plan for you or your child that includes information on your asthma triggers and how to control and reduce asthma attacks in your home. Share it with those who spend time with your child like teachers, babysitters, and coaches.

Remember that an asthma attack does not always present

as wheezing. Often the person with asthma will only cough. If you have asthma, don't wait until you hear wheezing to try your rescue inhaler (albuterol). If you do have asthma, some signs that your asthma may be out of control are:

* Asthma symptoms (coughing, wheezing, chest tightness, shortness of breath) more than TWO days per week.

* Asthma symptoms more than TWO nights per month.

* Having to use your rescue inhaler (albuterol) more than 2 times per week.

Being able to breathe well is important. If you are having any of the above symptoms chronically, especially after trying some of the suggestions above, see your health care provider for help.

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The Examiner welcomes your comments and suggestions concerning the publication. Deadline for submission of articles is the 15th of each month for the following month's edition. Any format is welcome, however, the preferred method of submission is by e-mail or by computer disk.

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Life's Lesson...

One benefit of getting old is...

In a hostage situation you are likely to be released first!

Preterm Birth: Born Too Early

By Cmdr. Kathleen Hewitt, CNM/WHNP
Robert E. Bush Naval Hospital

What is Preterm Labor?

November is Prematurity Awareness Month and if you are expecting a baby in the next four to five months, knowing the risks of premature births can help to prevent the possibility of delivering your baby too soon.

Preterm or premature labor happens when you go into labor before 37 completed weeks of pregnancy. This is too early for your baby to be born. Premature labor and delivery can happen to any pregnant woman, and babies born too soon can have lifelong or life-threatening health problems.

Researchers and health care providers have identified some risk factors for preterm labor, but they still cannot predict which women will give birth too

early. Having a risk factor does not mean a woman will have preterm labor or a preterm birth, however it does mean that she is more likely to have preterm labor or birth than other women.

Three groups of women are at greatest risk: (1) Women who have had a previous preterm birth; (2) Women who are pregnant with twins, triplets, or more; and (3) Women with certain uterine or cervical abnormalities.

Some studies have found that certain lifestyle factors may put a woman at greater risk for preterm labor as well. These factors include: late or prenatal care; smoking; drinking alcohol; using illegal drugs; domestic violence, including physical, sexual or emotional abuse; lack of social support; stress; or working hours with prolonged

periods of standing. Also, certain medical conditions during pregnancy may increase the likelihood that a woman will have preterm labor. These conditions include: urinary tract infections, vaginal infections, sexually transmitted infections; diabetes; high blood pressure; clotting disorders; vaginal bleeding; certain birth defects in the baby; being underweight or overweight before pregnancy; and a short time period between pregnancies (less than 6-9 months between birth and the beginning of the next pregnancy). Other risk factors such as African-American women; women younger than 17 or older than 35; and poor women have also been identified as having a greater risk for premature labor.

What Can You Do to Reduce Your Risk?

While it is true that many women without any risk factors will have a preterm baby, there are some things you can do to reduce the chance that it will happen to you.

Registered users click into health care resources

By Jenna Holtz,
TriWest Healthcare Alliance

Registering on TriWest Healthcare Alliance's comprehensive website allows TRICARE beneficiaries to access a larger window of resources at www.triwest.com.

Becoming a registered user also gives TRICARE's West Region beneficiaries a faster and easier source regarding information about their benefits. In addition to visiting a local TRICARE Service Center (TSC) or calling 1-888-TRIWEST, beneficiaries can access information about their health care benefits online anytime, day or night, at www.triwest.com.

The site offers many resources for beneficiaries, such as TRICARE-related forms and information about their benefits. For registered users, much more is also available at the click of a mouse.

Features, such as tracking out-of-pocket expenses and providing updates about other health insurance are available after registering. Other features include viewing and printing Explanations of Benefits (EOBs), registering for automatic enrollment fee payment options, receiving TRICARE updates, verifying eligibility, and tracking the

Continued on page 6

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Pamela Devine, Information Management Department, receives a 10-Year Civilian Length of Service Award.

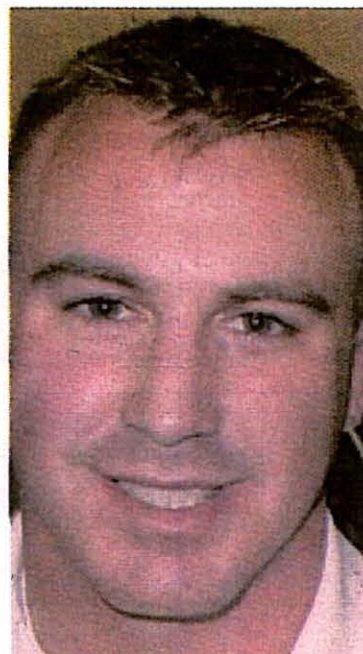
Lt. David Bruno, left, Head, Patient Admin., receives a Navy and Marine Corps Commendation Medal.



HM3 Tanisha Domaguin, Preventive Medicine, receives a Letter of Appreciation.



Dan Cornell, House Keeping Department receives a 15-Year Civilian Length of Service Award.



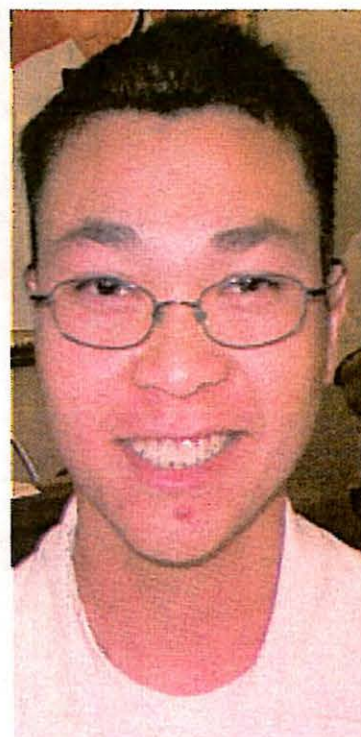
HA Robert Kirby, Adult Medical Care Clinic, receives a Letter of Commendation.



HA Marco Saavedra, Adult Medical Care Clinic, receives a Letter of Appreciation.



HN Leanne Hill, receives a Navy Medical Center San Diego Letter of Appreciation.



HN Loc Do, Adult Medical Care Clinic, receives a Letter of Appreciation.

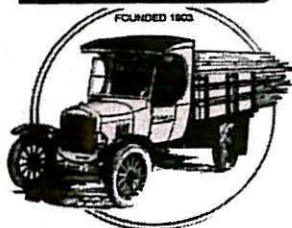


HM2 Joe Kao, receives a Navy and Marine Corps Achievement Medal.



Lt. Gina Mathis, Head Human Resources, receives a Navy and Marine Corps Achievement Medal.

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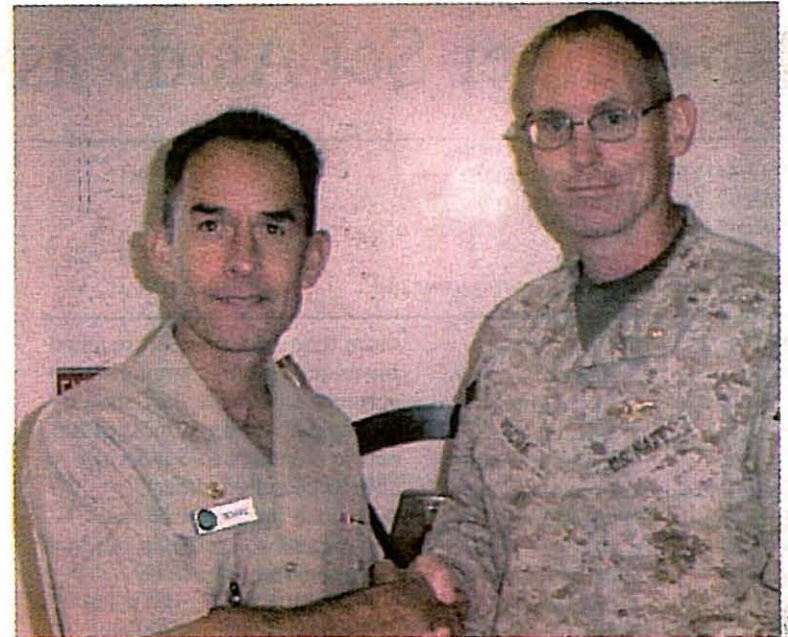
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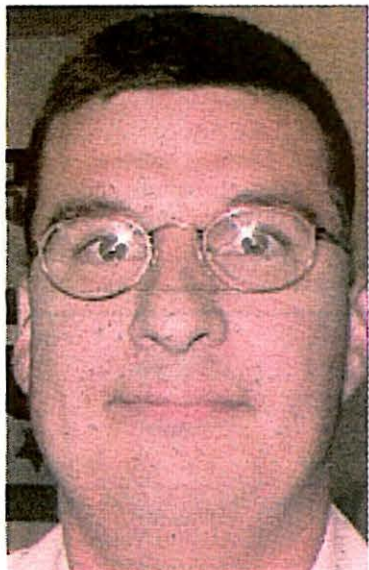
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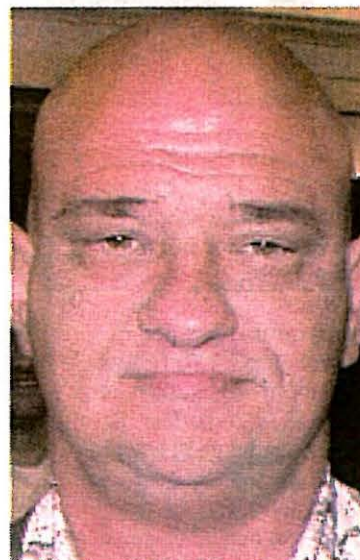
Ensign Sarah Bishop, Health Care Operations, left, takes on the responsibilities as the "Boot Ensign" from Ensign Macedonio Herrera, right, of the Material Management Department.



Captain Boman, Commanding Officer, Robert E. Bush Naval Hospital, representing the command, receives a plaque from Captain Pecha, in appreciation for the hospital's service to the Marines and Sailors of 1st Battalion, 14th Marines.



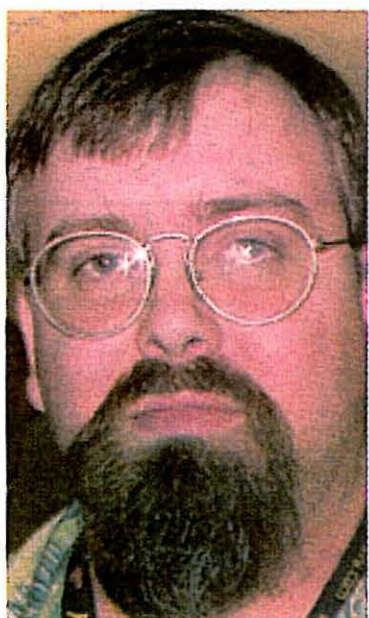
CS1 Robert Murray, left, BEQ Operations receives a Navy and Marine Corps Achievement Medal.



Bill Williams, right, Facilities Maintenance Department, receives a 20 Year Civilian Length of Service Award.



HM3 Philip Consolacion, Education and Training, takes the oath of reenlistment at a recent ceremony.



Brain Barber, Outpatient Records, receives a 10-Year Civilian Length of Service Award.



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November Set Aside as Native American Heritage Month

By HMI (FMF) Michael Santos
VMU-1, Camp Taqqadum, Iraq
Special to The Examiner

michael.santos@acemnf-wiraq.usmc.mil

Whenver the names Pocahontas, Sacajawea, Chief Joseph, Crazy Horse, Geronimo and Sitting Bull were mentioned, one will quickly associate them with the red-skinned people stereotyped as the Indians. These individuals share a commonality in that they are all descendants of the first Americans who played significant roles in cultivating the rich heritage of the United States of America.

According to historical facts, a Portuguese explorer, Christopher Columbus was enticed by the exotic tales of the orient by Marco Polo, the Merchant of Venice. In 1492, Columbus set a westward route and sailed for the Far East then known as the medieval Asia. Instead, he landed in what was to be the New World. Believing that he was in the East Indies, Columbus referred to the natives he met along the way as Indians. The rest is history.

Due to massive diversity of the different tribes which numbers

more than 700, there arose some misunderstandings among activists as to what they should be named. Although most of the ethnic members find it acceptable to be called either American Indians or Native Americans, a significant portion of them still prefer to be addressed as to specific tribal designations such as Apache, Blackfeet, Cherokee, Cheyenne, Chippewa, Choctaw, Creek, Sioux and very many other tribes who believed that it gives them their genuine pride and dignity.

To identify the groups served by the Department of the Interior's Bureau of Indian Affairs, the term American Indian or Native American and Alaska Native (Aleuts, Inuits, Eskimos and Yupiks in Alaska) was created. This should erase the mark of bigotry and alleviate confusions in differentiating between the people of India in South Asia and the indigenous natives of America. However, other names pop out of some literature such as Amerindians, Amerinds, Original Americans and just plain Indians.

In 1990, a joint Congressional

Resolution was approved by President George H. W. Bush designating the month of November as National American Indian Heritage Month. Since then, the month of November is celebrated annually to honor the priceless contribution of the first inhabitants in the continent.

NATIVE-AMERICAN HERITAGE MONTH



According to the US Census Bureau, as of July 2004, these special groups of people comprises about 1.5% of the total US population, numbering approximately 4.4 million. The majority of them settled in California (687,400) followed by Oklahoma (398,200) then Arizona (322,200). The most common language is Navajo which is spoken by over 175,000 natives.

More than half of States names

originated from different tribes and languages such as the following: Alabama (Alibamu tribe); Connecticut (Mohican's Quinnehtukqut), which means beside the long river; Illinois (Illiniwek tribe); Indiana (land of the Indians); Kentucky, (Iroquian's Kentahten), which means land of tomorrow and etc.

Many American English words also have their origins from American Indians such as bayou (Choctaw's bayuk), igloo (Inuit's iglu), kayak (Yupik's qayaq), squash (Narragansett's askutasquash), moose (Abenaki's mos), tepee (Sioux's tipi), tomahawk (Algonquian's tamahaac) and many other words.

Their endowment to the field of music, arts, economics and religion brought significant impact to our present society as well but their most important offering is heroism through military service. Over 185,000 veterans have served our country gallantly, 24 of whom are Medal of Honor recipients.

The most notable of all are the Navajo Code talkers who transmitted secret cryptological messages over tactical phones and radio using their native tongue, a method which is almost impossible to be deciphered by the enemy. This exceptional service to the country that only they could give turned the tide of battle and was instrumental in the US victory over Japan during World War II. Several thousands are still actively serving as Airmen, Marines, Soldiers and Sailors in the armed forces military and dedicating their precious time and life for our nation and our global war on terrorism.

As we honor the legacy of our Native American brethren, let us rekindle in our heart and mind the struggles and sacrifices they have endured in the vast frontier of the past. Let us render our deepest respect and gratitude about the rich heritage they have shared in helping shape the diverse culture and history of this land of the free.

Registered users click into health care resources

Continued from page 3

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Some Actual Facts About Turkey

By Lt. Michael J. Mero, MS, RD
Department Head, Nutrition Management Department
Robert E. Bush Naval Hospital

Unless a peanut butter and jelly sandwich is your idea of a Thanksgiving meal, you probably have had firsthand experience with the after-dinner fatigue that sets in after the meal. Why do you want to sleep? To flee from the job as dishwasher? Perhaps, but the meal itself plays a big part in the way you feel.

The bird is often cited as the culprit in after dinner lethargy, but the truth is that you could omit the fowl altogether and still feel the effects of the feast. Turkey does contain L-tryptophan, an essential amino acid with a documented sleep induc-

ing effect. L-tryptophan is used in the body to produce the B-vitamin, niacin. Niacin, in turn, is used to produce serotonin, a neurotransmitter that exerts a calming effect and regulates sleep. However, L-tryptophan needs to be taken on an empty stomach and without any other amino acids or protein in order to make you drowsy. In fact, if you are having trouble sleeping, eat some turkey right before going to bed, and the L-tryptophan should help!

There's lots of protein in a serving of turkey yet it's probably not the only food on the table:

* Carbohydrates
Actually, a carbohydrate-rich meal increases the level of L-

tryptophan in the brain and leads to serotonin synthesis. Carbohydrates stimulate the pancreas to secrete insulin. When this occurs, some amino acids that compete with tryptophan leave the bloodstream and enter muscle cells. This causes an increase in the relative concentration of tryptophan in the bloodstream. Serotonin is then synthesized and you feel sleepy.

* Fats

Fats slow down the digestive system, giving Thanksgiving dinner plenty of time to take effect. Fats also take a lot of energy to digest, so the body will redirect blood to your digestive system to tackle the job. Since you have less blood flow elsewhere, you will feel less energetic after eating a meal rich in fats.

* Alcohol

Alcohol is a central nervous system depressant. If alcoholic beverages are part of the holiday

celebration, then they will add to the sleep-effect.

* Overeating

It takes a great deal of energy to digest a large meal. When your stomach is full, blood is directed away from other organ systems, including your nervous system. As a result, you will feel the need to snooze after any big meal, particularly if it is high in fats and carbohydrates.

* Relaxation

Although many people find the holidays stressful, the most relaxing part of the festivities is likely to be the meal. No matter what you may have been doing throughout the day, Thanksgiving dinner provides an opportunity to sit back and relax - a feeling that can carry over after the meal.

So, why are you tired after Thanksgiving dinner? It's a combination of the type of food, amount of food, and celebratory atmosphere. So just how do you avoid that sleepy feeling on Turkey Day? Here are a few

tips to help you feel more energized on Thanksgiving:

* Eat small, healthy meals (try to limit junk foods) throughout the day before you sit down for your big meal don't starve yourself in anticipation of the feast to come.

* Have small portions of foods that are part of your Thanksgiving meal (including whatever veggies are on the table).

* Try not to take in too many carbohydrates.

* Drink water and take breaks while you are eating to see how full you've become.

* Stop eating once you're full & there will always be leftovers tomorrow.

* Finally, take a walk outside afterward to digest your meal. This will make you feel better than crashing on the couch.

Hope your Thanksgiving is filled with friends, family, and great food. Happy Thanksgiving!



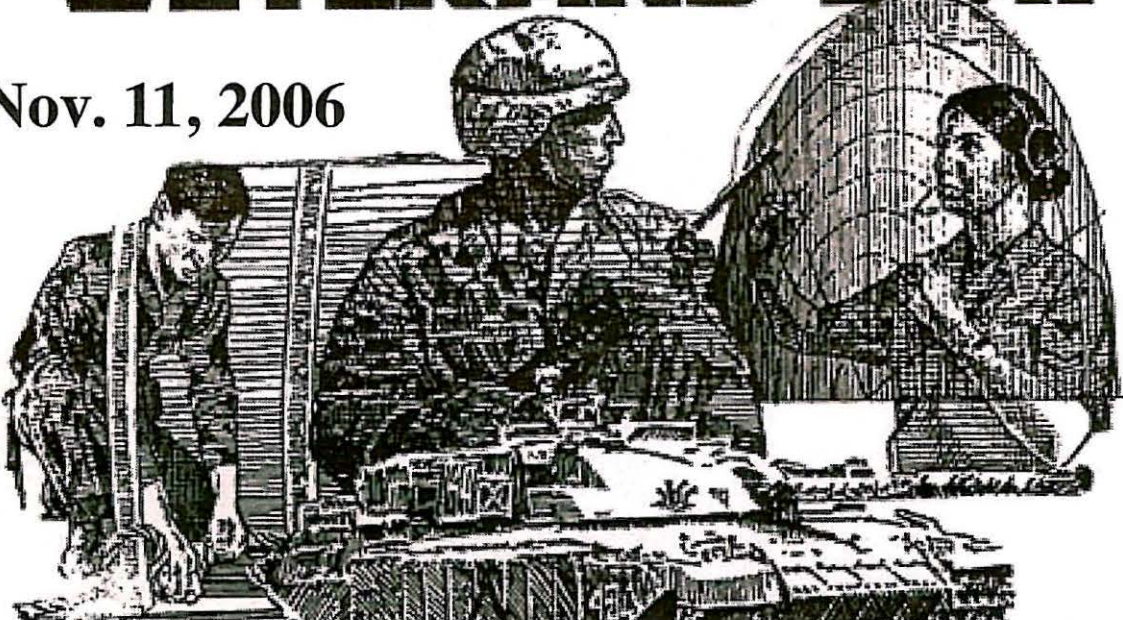
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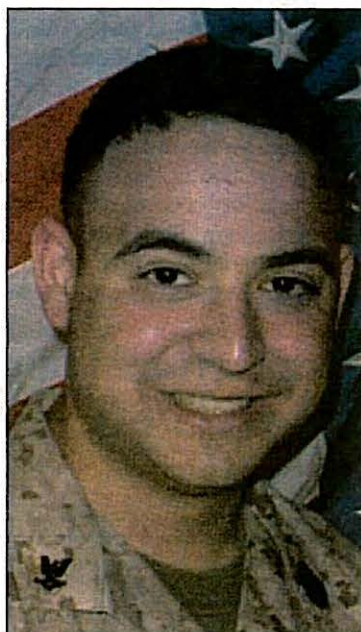
Continued from page 1



tingency team was not fully prepared. To ensure that the team would be running at 100%, you developed a standard operating procedure, personal gear list, a recommended medical gear list, team rosters, and finally a mission statement. Your efforts have allowed the team to be fully prepared to activate in a moments notice."

Petty Officer 3rd Class, Jared Chiaia, Adult Medical Care Department, was selected as the Junior Sailor of the Quarter. His citation reads in part, "As Assistant Leading Petty Officer of the Adult Medical Care Department, you were directly

responsible for the coordination, check-in procedures, and record-keeping for over 2,000 scheduled medical appointments. As the Medical Records Section Leader, you were accountable for the maintenance and tracking of over 3,000 medical records. You directed the medical in-processing and out-processing of 900 Marines assigned to Headquarter Battalion and the Marine Corps Communication-Electronics School. You processed 1,200 medical documents through mail-outs utilizing the marine locator. Your



performance in each of these duties was second-to-none. In addition, you participated in three Color Guard ceremonies, including those for one retirement and two funerals. You also volunteered at the Angel Reyes Center in Joshua Tree to



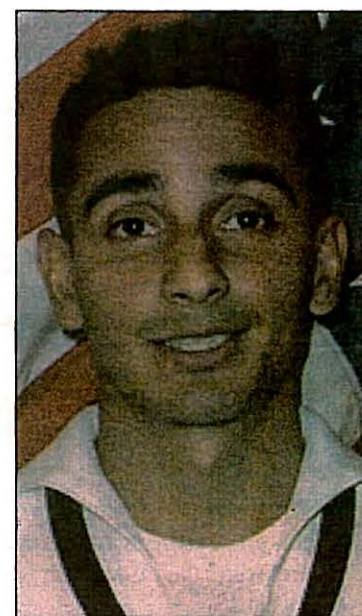
spend time with mentally challenged children."

Mrs. Maria Santos-King, Fiscal Department, was selected as the Junior Civilian of the Quarter. Her citation reads in part, "During this quarter, you provided outstanding customer service and on-site assistance to

both employees and department heads for all time and attendance inquiries regarding pay and leave. You set the standard for all commands to emulate by conducting random, internal timekeeping audits on the command timekeepers' documentation and providing feedback to the command's leadership. Additionally, to prepare for fiscal year 2007, your initiative positively impacted the command's mission on different levels, as the command prepared to close out fiscal year 2006. You energetically volunteered to learn additional job responsibilities to augment a personnel shortage in the command's office. You analyzed multiple facets, allowing the comptroller to make budget decisions directly related to successful command equipment purchases. You also facilitated accuracy for the monthly civilian full-time equivalent spreadsheet, which was utilized by the command to make sound financial decisions regarding filling civilian positions."

Hospitalman Edgar Escobar-Grande, of the Emergency Medicine Department, was named as the Blue Jacket of the Quarter. His citation reads in part, "While serving as Hospitalman, Emergency

Department, you consistently performed your duties with the highest degree of pride and professionalism. Your tireless efforts ensured that the Emergency Department gave the greatest possible care to active duty patients and their dependents. Your top notch performance and enthusiasm have made you a valuable member of our team. You are sought after by junior Sailors for your extensive knowledge of the Emergency Departments procedures, and your hard work and motivation is inspiring."



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